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**BOX AF**

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**MAIL STOP AF  
AMENDMENT UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE  
GROUP ART UNIT 2852**

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01306.000098

**PATENT APPLICATION**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:	)	
	:	Examiner: R. Gleitz
KOHEI KOSHIDA	)	
	:	Group Art Unit: 2852
Appln. No.: 10/600,704	)	
	:	
Filed: June 23, 2003	)	
	:	
For: IMAGE FORMING APPARATUS	)	June 16, 2005

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT AFTER FINAL REJECTION**

Sir:

**Introductory Comments**

In response to the Official Action mailed April 11, 2005, the Examiner is respectfully requested to amend the above-identified application as follows.



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TJW  
AF

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**MAIL STOP AF**  
**AMENDMENT UNDER 37 CFR 1.116**  
**EXPEDITED PROCEDURE**  
**GROUP ART UNIT 2852**

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In re Application of:

KOHEI KOSHIDA

Application No.: 10/600,704

Docket No.: 01306.000098

Filed: June 23, 2003

Examiner: R. Gleitz

For: IMAGE FORMING APPARATUS

Group Art Unit: 2852

Date: June 16, 2005

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final Rejection in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	9	MINUS	20	= 0	x \$25 \$50	\$0.00
INDEP. CLAIMS	1	MINUS	3	= 0	x \$100 \$200	\$0.00
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

°Verified Statement claiming small entity status is enclosed, if not filed previously.

A check in the amount of \$\_\_\_\_ is enclosed.

Charge \$\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

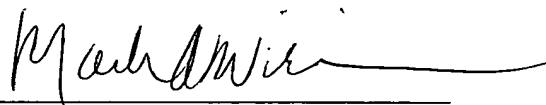
Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.

A check in the amount of \$\_\_\_\_ to cover the fee for a \_\_\_\_ month extension is enclosed.

A check in the amount of \$\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.

Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our below-listed address.

Respectfully submitted,



Mark A. Williamson  
Attorney for Applicant  
Registration No. 33,628

FITZPATRICK, CELLA, HARPER & SCINTO  
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New York, New York 10112-3801  
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